



**WILDLIFE AND HERITAGE SERVICE
APPLICATION FOR REGULATED SHOOTING AREA
PERMIT/LICENSE**

INSTRUCTIONS

1. Fee \$150.00. Make check payable to Department of Natural Resources.
2. Print or type all information.
3. Please be sure to complete all pages of this application.
4. Contact this office at 410-260-8540, or wildlifepermits.dnr@maryland.gov if you have any questions.

Return completed application to:
Permits Coordinator
Wildlife and Heritage Service
Tawes State Office Building
580 Taylor Ave, E-1
Annapolis, MD 21401

NEW PERMIT/LICENSE WILL EXPIRE ON JUNE 30TH FOLLOWING THE DATE OF ISSUANCE.

CURRENT INFORMATION

1. NAME					
2. BUSINESS/ORGANIZATION (IF APPLICABLE)					
3. STREET					
4. CITY		5. STATE		6. ZIP	
7. COUNTY					
8. PRIMARY PHONE		9. ALT PHONE			
10. EMAIL				11. DATE OF BIRTH	
12. SSN/TAX ID/FID					

13. PLEASE ATTACH A TAX MAP OF THE PROPERTY.

LOCATION WHERE ACTIVITY WILL BE CONDUCTED (IF APPLICABLE):

14. ARE YOU APPLYING FOR A COMMERCIAL OR NON-COMMERCIAL REGULATED SHOOTING AREA?

COMMERCIAL		NON-COMMERCIAL	
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15. IF YOU ARE APPLYING FOR A COMMERCIAL RSA, WOULD YOU LIKE YOUR NAME, ADDRESS, AND/OR TELEPHONE NUMBER TO APPEAR ON A LIST OF COMMERCIAL RSAS THAT IS MADE AVAILABLE TO THE PUBLIC ON THE DEPARTMENT WEBSITE?

	Yes		No	If yes, provide information you wish to make available below
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16. LIST SPECIES TO BE RELEASED AND WHERE YOU PLAN TO OBTAIN THEM:

17. Maryland law allows an RSA operator to allow Sunday hunting under the authority of this permit in accordance with the terms of this permit for any birds except free-flying mallard ducks. Do you wish to allow Sunday hunting?

	Yes
	No

18. Maryland law authorizes an RSA operator to allow for the hunting of captive raised bobwhite quail in accordance with the terms of this permit from October 1 through March 31st. Do you wish to apply for this privilege?

	Yes
	No

19. CHECK ONE OF THE FOLLOWING TO COMPLY WITH MARYLAND'S WORKMEN COMPENSATION ACT (ARTICLE 1-401). I AM:

	SUPPLYING DNR WITH A CERTIFICATE OF INSURANCE.
	SUPPLYING DNR WITH INSURANCE BINDER NUMBER
	SELF-EMPLOYED OR EMPLOY ONLY FAMILY MEMBERS, AND THEREFORE I AM NOT REQUIRED TO COMPLY WITH THIS LAW.

20. I HEREBY APPLY FOR THE ABOVE PERMIT/LICENSE AND CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SIGNATURE		DATE	
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DNR (02/2023)

RSA